

Electronic Filing System (EFS) Data
Electronic Patent Application Submission
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EFS ID: 17838
Application ID: 10065036
Title of Invention: METHOD AND SYSTEM FOR
EXTENDED VOLUME IMAGING
USING MRI WITH PARALLEL
RECEPTION
First Named Inventor: Yudong Zhu
Domestic/Foreign Application: Domestic Application
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Attorney Docket Number: 122235
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Trademark Office, ou=Department of Commerce, o=U.S.
Government, c=US
Certificate Message Digest: YfWjtGgSVn2vvUIJ1pqeLw==
Total Fees Authorized: \$888.0
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Deposit Account Number: 70868
Deposit Account Name: Jean K Testa





TRANSMITTAL FORM

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Stylesheet Version: 1.0

Submission Type: Utility Patent
Filing

Attorney Docket
Number:

122235

METHOD AND SYSTEM FOR EXTENDED VOLUME IMAGING USING MRI WITH PARALLEL RECEPTION

First Named Inventor: Yudong nmn Zhu

SUBMITTED BY

Name:	Jean K Testa
Registration Number:	39396
Electronic Signature Mark: JKT	Date Signed: 20020912

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I, the undersigned, certify that I have viewed a display of document(s) being electronically submitted to the United States Patent and Trademark Office, using either the USPTO provided style sheet or software, and that this is the document(s) I intend for initiation or further prosecution of a patent application noted in the submission. This document(s) will become part of the official electronic record at the USPTO.

Attached Files:

declaration	Dec1.tif
declaration	Dec2.tif
bibd-transmittal	Testa122235apds.xml

patent-assignments
fee-transmittal
specification

Testa12235asgn.xml
Testa12235fee.xml
12235.xml

Attached Image File(s):

Dec1.tif

Dec2.tif

Comments:

DECLARATION FOR PATENT APPLICATIONDocket Nur
12223t

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

METHOD AND SYSTEM FOR EXTENDED VOLUME IMAGING USING MRI WITH PARALLEL RECEPTION

the specification of which is attached hereto unless the following box is checked:

☐ was filed on _____ as United States Application Number or PCT International Application Number _____
and was amended on _____ (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as a by any amendment referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulation §1.56. I hereby claim foreign priority benefits under Title 35, United States Code, §119(a)-(d) of any foreign application(s) for inventor's certificate listed below and have also identified below any foreign application for patent or inventor's certificate having date before that of the application on which priority is claimed.

Prior Foreign Application

Priority Claimed

_____ (Number)	_____ (Country)	_____ (Day/Month/Year Filed)
_____ (Number)	_____ (Country)	_____ (Day/Month/Year Filed)

☐ Yes ☐ No☐ Yes ☐ NoI hereby claim the benefit under Title 35, United States Code, §119(e) of any United States provisional application(s) listed below.

_____ (Application Number)	_____ (Filing Date)
_____ (Application Number)	_____ (Filing Date)

I hereby claim the benefit under Title 35, United States Code §120 of any United States Application(s) listed below and, in so the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations, §1.56 which became available between the filing of the prior application and the national or PCT international filing date of this application.

_____ (Application Number)	_____ (Filing Date)	_____ (Status - patented, pending, abandon
_____ (Application Number)	_____ (Filing Date)	_____ (Status - patented, pending, abandon

I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith, **CUSTOMER NO. 006147.**

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CRD Patent Docket Rm 4A59**

Docket Nur
122235

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information belief are believed to be true and further that these statements were made with the knowledge that willful false statements are like so made are punishable by fine or imprisonment or both, under Section 1001 of Title 18 of the United States Code and such willful false statements may jeopardize the validity of the application or any patent issued thereon.

SOLE OR FIRST INVENTOR:

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First Name

Middle Name

Last Name

Signature: _____

Date

Residence: _____

City and State

Citizenship: _____

Post Office Address: _____

FEE TRANSMITTAL

Electronic Version 1.1.0

Stylesheet Version: 1.0

Patent fees are subject to annual revisions on or about October 1st of each year.

Large Entity

TOTAL FEES AUTHORIZED: \$ 888

The commissioner is hereby authorized to charge indicated processing and/or publication fees and credit any overpayments to:

Deposit Account Number: 07-0868



Deposit Account Name: General Electric Company GRC

Charge Any Additional Fee Required Under 37 C.F.R. Sections 1.16 and 1.17.

Charge Assignment Fees Required Under 37 C.F.R. Section 1.21 (h).

SUBMITTED BY

Authorized Name: Jean K Testa

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Date Signed: 20020912

BASIC FILING FEE

Fee Description	Fee Code	Fee Paid
Utility Filing Fee	101	\$ 740

Subtotal For Basic Filing Fee: \$ 740

EXTRA CLAIM FEES

	Fee Code	Fee	Extra Claims	Fee Paid
Total Claims: 26	103	\$ 18	6	\$ 108
Independent Claims: 3	102	\$ 84	0	\$ 0

10065036 091202

Subtotal For Extra Claims Fees: \$ 108

ADDITIONAL FEES

Fee Description	Number	Quantity	Fee Code	Amount	Fee Paid
Recording Each Patent Assignment Per Property Fee	00000000	1	581	\$ 40	\$ 40

Subtotal For Additional Fees: \$ 40